

Summary of 2010 benefit changes

Cost increases

- Out-of-pocket expenses are increasing for KingCareSM, but not for Group Health and Deputy Sheriff plans (refer to the mailer that was sent to your home mailing address).
- The benefit access fee for covering a spouse/domestic partner who has access to medical coverage through an employer other than King County **will increase from \$35 a month to \$50 a month.**

KingCareSM benefits

- Chemical dependency treatment will no longer be limited as long as it is medically necessary (this year, chemical dependency treatment is limited to \$15,000).
- Mental health care will no longer be limited as long as it is medically necessary, but preauthorization is required (this year, mental health care is limited to 30 days a year for inpatient care and 52 visits a year for outpatient care).

Express Scripts benefits

- There will be a \$1,500 annual cap on the amount you will pay for prescription drugs, with an annual cap of \$3,000 for a family.
- Express Scripts will implement progressive management for 12 medications. Progressive medication management begins your treatment with a generic drug, followed by either a preferred or a non-preferred brand, or with a progression of treatment from a generic drug to a preferred brand to a non-preferred brand. If you have been taking one of the 12 medications over the previous 130 days, you may continue that medication without progressive medication management.

Group Health benefits

- Chemical dependency treatment will no longer be limited as long as it is medically necessary (this year, chemical dependency is limited to \$14,500 every 24 months)
- Mental health care will no longer be limited as long as it is medically necessary, but preauthorization is required (this year, mental health care is limited to 12 days a year for inpatient care and 20 visits a year for outpatient care).
- The waiting period for an organ transplant will be reduced to six months from 12 months (the waiting period for KingCareSM members will remain at 12 months).
- Preventive care visits will now be covered at 100% without a copay.
- Allergy serum will now be administered as a medical benefit instead of a pharmacy benefit and will be subject to the office visit copay.

Dental benefits

- The maximum annual dental benefit will increase from \$2,000 to \$2,500 per member.

Vision benefits

- You may now receive a 30% discount for an unlimited number of pairs of prescription glasses and non-prescription sunglasses when you buy them from the Vision Services Plan eye care provider on the same day the provider gives you an eye exam. You still receive a 20% discount for an unlimited number of pairs of glasses you order through any VSP eye care provider within 12 months of your last covered eye exam.
- You may qualify for full coverage for a contact lens evaluation and an initial supply of approved lenses, including toric, multifocal and hydrogel lenses, depending on whether you're replacing the same contact lenses or you're a new or refit wearer of contact lenses. If you don't qualify for this coverage, you will continue to receive the current 15% discount for contact lens services and up to \$105 for contact lenses. In either case, ask your eye care provider to explain your fees before you receive care.

Healthy IncentivesSM program

- The Healthy IncentivesSM program will continue through 2012 with more options for individual action plans.